## PART B - FEE(S) TRANSMITTAL

| OCI 0 3 2001 E  | Mail Stop ISSUE FEE<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, Virginia 22313-1450 |                                      |   |   |  |  |   |   |  |   |  |
|---|---|--------------------------------------|---|---|--|--|---|---|--|---|--|
| 6-1   | em should be used 6   | `o# ####                             | mitting the ISSI  | <del></del>   | (57  | 1)-273-2885  |   |   |  |   |  |
| INSTRUCTIONS: This for appropriate. All further con indicated unless corrected maintenance fee notification   | rm should be used interpreted including below or directed others.                                   | or trans<br>ig the P<br>ierwise      | rations the 1880<br>rations, advance of<br>in Block 1, by (a        | ders and notification  specifying a new of  | of n   | naintenance fees was pondence address;   | red). It<br>vill be<br>and/or                     | mailed to the current<br>(b) indicating a sepa  | nould be<br>correspon<br>rate "FEE   | completed where dence address as ADDRESS" for   |  |
| CURRENT CORRESPONDENC   |   | Note<br>Fee(<br>pape                 | e: A certificate of<br>(s) Transmittal. Thi<br>ers. Each additiona  | mailing<br>s certif<br>l paper  | g can only be used for<br>icate cannot be used for<br>such as an assignmentalling or transmission. | r domestion  | mailings of the                                   |   |  |   |  |
| OSTROLENK F.  | 590 08/10<br>ΔRFR GFRR &  |                                      | FFN   |   | 1 6  | Cer  | tificate  | of Mailing or Trans   | mission  | 3 *.1 .1 ** ** *. 1   |  |
| 1180 AVENUE OI<br>NEW YORK, NY  |   | State<br>addi<br>trans               | es Postal Service we<br>ressed to the Mail<br>smitted to the USP    | vith suf<br>Stop<br>TO (57  | s) Transmittal is being<br>ficient postage for firs<br>ISSUE FEE address<br>1) 273-2885, on the d  | t class ma<br>above, or<br>ate indicat   | il in an envelope<br>being facsimile<br>ed below. |   |  |   |  |
| 10/03/2007 HDESTA2  |   |                                      | Robert  | ç.  | Faber  |  | (Depositor's name)                                |   |  |   |  |
| 01 FC:1501<br>FC:1504   |   | September 28, 2007 (Signature)       |   |   |  |  |   |   |  |   |  |
| FC:8001   | FC:8001 30  |                                      | 0.00 OP   |   |  | september  |   |   |  |   |  |
| APPLICATION NO.   | FILING DATE   |                                      | FIRST NAMED INVE  |   |  |  | ATTO  | DRNEY DOCKET NO. CONFIRMATION NO.   |  |   |  |
| 10/528,382 05/18/2005 Roberto Jourdan De Aquino P/3255-87 6864 TITLE OF INVENTION: METHOD AND DEVICE FOR MONITORING A FLEXIBLE PIPE   |   |                                      |   |   |  |  |   |   |  |   |  |
| THEE OF INVENTION. IV   | iemos mos bevi  | CLIO                                 | · momionino   | AT ELXIDEL THE  |  |  |   |   |  |   |  |
|   |   |                                      |   |   |  |  |   |   |  | •   |  |
| APPLN. TYPE   | SMALL ENTITY  | ISS                                  | UE FEE DUE  | PUBLICATION FEE   | DUE  | PREV. PAID ISSUI   | E FEE   | TOTAL FEE(S) DUE  | I  | DATE DUE  |  |
| nonprovisional  | . NO  |                                      | \$1400  | \$300   |  | \$0  |   | \$1700  | 1  | 1/13/2007   |  |
| EXAMINER  |   |                                      | ART UNIT CLASS-SUBCL  |   | S  |  |   |   |  |   |  |
| WEST, PAUL M  |   |                                      | 2856  |   |  |  |   |   |  |   |  |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  |   |                                      |   |   |  | atent front page, lis<br>3 registered paten  | st<br>t attorr                                    | OSTROLENK, FAI  | BER, GEF   | RB & SOFFEN, L  |  |
| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  |   |                                      |   | 2. For printing on the patent front page, list OSTROLENK, FABER, GERB & SOFFEN, LI or agents OR, alternatively,  (2) the name of a single firm (having as a member a  |  |  |   |   |  |   |  |
| "Fee Address" indication (or "Fee Address" Indication form O/SB/47; Rev 03-02 or more recent) attached. Use of a Custon number is required.   |   |                                      |   | registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  |  |  |   |   |  |   |  |
| 3. ASSIGNEE NAME AND  |   |                                      |   |   | ٠.   | ,  |   |   |  |   |  |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. |   |                                      |   |   |  |  |   |   |  |   |  |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)   |   |                                      |   |   |  |  |   |   |  |   |  |
| TECHNIP FRANCE  |   | . categor                            | ies (will not be pr   | FRANCE  |  | Individual X Co  | ·morati   | on or other private gro   | un entity  | □ Covernment  |  |
| 4a. The following fee(s) are  |   |                                      | <u> </u>  |   |  |  |   | iously paid issue fee   | ·  |   |  |
| Issue Fee A check is enclo  |   |                                      |   |   |  | sed.   |   |   |  |   |  |
| Publication Fee (No small entity discount permitted)  Advance Order - # of Copies   |   |                                      |   | ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form). |  |  |   |   |  |   |  |
| 5. Change in Entity Status  a. Applicant claims S   |   |                                      |   | b. Applicant is no  | o lons   | ger claiming SMAI  | L EN  | ΓΙΤΥ status. See 37 CI  | R 1.27(g)  | (2).  |  |
| NOTE: The Issue Fee and P interest as shown by the reco   | ublication Fee (if requ   | iired) w                             | rill not be accepted  | d from anyone other t   |  |  |   |   |  |   |  |
| Authorized Signature  | Mydul   | 16                                   | Love  | <u> </u>  |  | Sept   | temb  | per 28, 200   | )7   | <del>-</del>  |  |
| Typed or printed name _   |   | September 28, 2007  Date             |   |   |  |  |   |   |  |   |  |
| This collection of informatic an application. Confidential submitting the completed at this form and/or suggestion: Box 1450, Alexandria, Virg Alexandria, Virginia 22313-Under the Paperwork Reduces   | ity is governed by 35 pplication form to the s for reducing this but inia 22313-1450. DC-1450.      | U.S.C.<br>USPT(<br>den, she<br>NOT S | 122 and 37 CFR D. Time will vary ould be sent to the BEND FEES OR C | 1.14. This collection depending upon the Chief Information COMPLETED FORM   | is est<br>indiv<br>Office<br>IS TO   | etain a benefit by t<br>imated to take 12 r<br>idual case. Any co<br>or, U.S. Patent and<br>D THIS ADDRESS | he publininutes<br>mment<br>Traden<br>S. SENI     | ic which is to file (and<br>to complete, includin<br>s on the amount of tir<br>nark Office, U.S. Depa<br>D TO: Commissioner | by the Using gathering gat | SPTO to process)<br>g, preparing, and<br>quire to complete<br>Commerce, P.O.<br>s, P.O. Box 1450, |  |

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2007.